	T REIMBURS	ABLE						PAI	D BY	
		(Department, bur	cau, or establishment)					iAi	<i>D</i> B1	
oucher prepa	ared at		(Give place and date)		~ ==		·	ENG	1 #1	
HE UNITED S	TATES, Dr.,	Payee's	s Account No					SAPC Z	3012	
Го					. .			COPY /	OF Z	
		(Pa	iyee)				-			•
	(Add	iress)	(City)		tate)					
No. and Date of Order	Date of Delivery or Service	(Enter description, its	FICLES OR SERVICE em number of contraction deen	ct or Federal si	upply	QUANTITY	UNIT	PRICE	AMOUN' Dollars	Ct
		Cost	•						1,098	5
AYMENT:										
Complete 🗌										
Partial 🗌 Final										
ipped from			tinuation sheet(s) if nee	Government	B/L No.]		Total	1.098	5
		t and just and that paymen				ee must NO	Γ use this	•	1,090	
·			at has not been receiv		Differen	ces				
S	TATINTL	(Sign original only)								-
ate 12/30/5	7 *Pavee									- -
			ertificate is made by payee on att		\$			مرا	1,098.	5
Per	141	Title Date	D. No.		<u> </u>	ature or init		nvoice Rec'	d	
ontract No. A-1			Reg. No.		1.	, acc		nvoice rec	u.	
ursuant to author	rity vested in me,	I certify that this account i	is correct and proper f	or payment.						
Approved for \$. arast	†		(Authoria	ed Certifyi	ng Officer)		
Y	- ~ 		SIGN ORIGINAL	Title						
,			ONLY							
itle						•				
	THE REVERSE OF T	HIS FORM MUST BE EXECUTED W	HEN PURCHASES ARE MADE	OR SERVICES SEC	UKED WITH	UUI WKIIIEN A	GREEMEN1	N ANI FURM		
	ACCOU	NTING CLASSIFICATION	I (Appropriation Sym	bol must be sl	own; oth	er classificat	ion option	al)		

Standard Form No. 1035a—Revised
Form prescribed by
Comptroller General, U.S.
September Approved For Belease 2000/04/11. CIARDP64-00360R000606010624NDUM
(Gen. Reg. No. 51, Supp. No. 11)

CONTINUATION SHEET

	Date of	ARTICLES OR SERVICES		OHAN	UNIT PRICE		AMOUNT		
of Order	Delivery or Service	(Enter description, item number of contract or Fe and other information deemed ned	deral supply schedule, cessary)	QUAN- TITY	Cost	Per	Dollars	Cts.	
		Contract <u>4-/0/</u> System I	τ				The state of the s		
		Direct Costs Properly Char Contract A-101 for the 1 thru 12/22/57	rgeable to period 12/16				-		
		STATINTL	Research & Development	<u>Pr</u>	oduet	ion	<u>To</u>	tal	
abor for	Week En	ding December 22, 1957		Ĭ					
		STATINTL	-						
ther Cos	ts - per she	schedule attached et # 2							
otal Lab	or and O	ther Costs							
& A exp	ense com	puted at interim .							
otal Cos	ts	STATINTL					\$ <u>1,098</u>	56	
					<u> </u> 				
			÷	- The second sec					
					- Stranger on the				

Standard Form No. 1035a—Revised
Form prescribed No. 2000 No. 2000

CONTINUATION SHEET

Vo. and Data	Date of Delivery	ARTICLES OR SERVICES	OUAN-	UNIT	PRICE	AMOUNT	
No. and Date of Order	Delivery or Service	(Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)	QUAN- TITY	Cost	Per	Dollars	C
CICKET INVOICE							
CR MEMO	CHECK #	PAYEE OR VENDOR NO.					1
041153	1108	136				\$ 2.	<u>. 35</u>
	!						
i 							
,							

	ia ¥	– App	ro	vec	Fc	or F	ه - Rele	as	e 20	000	/04/1	,	ÇIA	-RDP	64-003	60R00	06000	1002 ²	-2
	DISTR AMT	59.70	59.10 *	59.10 **	0-	74.75	47.75	49.	&	74.75	47-75 95- 120-06 *	120.06 **	577.80 ***						
12/22/57		 1	and the second s				1 e1 e1		,	p=4 p=4	e-le-l		,						
DATE	80	200	*		44	0 4 4	0 4 4			7-1	17				The second second second			·	
	M'NO	5041			5041	5041	5041			5041 5041	5041						-		
	ACCT	12501			12501 12501	12501	12501 12501		•	くろ	12501 12501						·		
COST	CNTR	254000			254000	254000	254000		ì	YY	254000 254000							-	
	CODE	050			220	50	50.12			ر 100	210								
PAYEE NAME	VENDOR NO	183 183			196 196	226 226	226 226		į	226	226 226								
CHECK	ON.	12197			12187 12187	12267	12267			88	12267								
TICKET INVOICE	CR MEMO	6668 6668			0000	NN	7026		•	NN	7026 7026								
BATCH	NO DATE	参 12 18 7		vec	12 17	12 19	域 12 19 7 12 19 7	1	9	12 19	12 19 7 12 19 7 14 19 7	1:	CIA	-RDP	64-003	60R00	06000)1002 ¹	1-2